PTO/SB/22 (12-04)
Approved for use through 7/31/2006. OMB 0651-0031
rademark Office: U.S. DEPARTMENT OF COMMERCE

	Onder A Control of Reduction Act of 1995, no persons are required	red to respond to a collection	of information unless if dis	plays a valid OMB control number.	
	PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005		Docket Number (Optional) 20274/1200990-US5		
	(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)				
	Application Number 09/375,514-Conf	f. #5198	Filed A	August 17, 1999	
	For ANTI-SENSE OLIGONUCLEOTIDES FOR INHIBITING THE GROWTH OF LYMPHOMA AND LEUKEMIA CELLS				
	Art Unit 1635		Examiner	T. A. Vivlemore	
	This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
	The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
		<u>Fee</u>	Small Entity Fee	<u> </u>	
	X One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 60.00	
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$	
	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$	
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
•	X Analisant alaima amall antituatatus. Sac 27	OCD 4.07			
	A pplicant claims small entity status. See 37 CFR 1.27.      A check in the amount of the fee is enclosed.      Payment by credit card. Form PTO-2038 is attached.      The Director has already been authorized to charge fees in this application to a Deposit Account.      The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-0100 . I have enclosed a duplicate copy of this sheet.				
•					
	l am the applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
	x attorney or agent of record.	25,351			
	attorney or agent under 37 CFR 1.34.  Registration number/flacting under 37 CFR 1.34				
	Signature Signature		Cabau	7 2005	
			February 7, 2005 Date		
	S. Peter Ludwig		(212)	527-7770	
	Typed or printed name		Telephone Number		
	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
	Total of 1 forms are subm	nitted.	<u> </u>		
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